Appendix D: Participant-Centered Planning and Service Delivery

Quality Improvement: Service Plan

As a distinct component of the State's quality improvement strategy, provide information in the following fields to detail the State's methods for discovery and remediation.

- a. Methods for Discovery: Service Plan Assurance/Sub-assurances
 - i. Sub-Assurances:
 - a. Sub-Assurance: Service plans address all participants' assessed needs (including health and safety risk factors) and personal goals, either by the provision of waiver services or through other means.
 - 1. Of the total number of service coordination monitorings, the number of monitorings that indicate safety issues are being addressed as documented in the service plan.

Data Source: SC monitoring tool
Responsible Party for data collection: State Medicaid Agency
Frequency of data collection: Ongoing and continuously, following
each annual and semi-annual service plan team meetings
Sampling Approach: 100% Review
Data Aggregation and Analysis: State Medicaid Agency
Frequency of data aggregation and analysis: quarterly, semiannually, or as determined by the DD QI Committee and/or Deputy
Director

2. Of the total number of service coordination monitorings, the number of monitorings that indicate medical issues are being addressed as documented in the service plan.

Data Source: SC monitoring tool
Responsible Party for data collection: State Medicaid Agency
Frequency of data collection: Ongoing and continuously, following
each annual and semi-annual service plan team meetings
Sampling Approach: 100% Review
Data Aggregation and Analysis: State Medicaid Agency
Frequency of data aggregation and analysis: quarterly, semiannually, or as determined by the DD QI Committee and/or Deputy
Director

- 3. Of the total amount of service plan reviews, the number of reviews that indicate medical services are specified and documented on the service plan.
- b. Sub-assurance: The State monitors service plan development in accordance with its policies and procedures.

Of the total number of service plans reviewed, the number of plans that have been determined to be written in accordance with identified DDD policies and procedures.

Data Source: SC Supervisor service plan review.

Responsible Party for data collection: State Medicaid Agency
Frequency of data collection: Ongoing and continuously, with each
review of the service plan
Sampling Approach: 100% Review
Data Aggregation and Analysis: State Medicaid Agency
Frequency of data aggregation and analysis: quarterly, or as
determined by the DD QI Committee and/or DD Deputy Director

c. Sub-assurance: Service plans are updated/revised at least annually or when warranted by changes in the waiver participant's needs.

Of the total number of service plans, the number of service plans developed by the team annually and reviewed semi-annually.

Data Source: SC Supervisor service plan review
Responsible Party for data collection: State Medicaid Agency
Frequency of data collection: Ongoing and continuously, following
each annual service plan team meeting
Sampling Approach: 100% Review
Data Aggregation and Analysis: State Medicaid Agency
Frequency of data aggregation and analysis: quarterly, or as
determined by the DD QI Committee and/or Deputy Director

Of the total number of service plans developed each year, the number of service plans that were revised due to a change in a person's needs.

Data Source: SC Supervisor service plan review
Responsible Party for data collection: State Medicaid Agency
Frequency of data collection: Ongoing and continuously, with each
review of the service plan
Sampling Approach: 100% Review
Data Aggregation and Analysis: State Medicaid Agency

Frequency of data aggregation and analysis: quarterly, or as determined by the DD QI Committee and/or Deputy Director

d. Sub-assurance: Services are delivered in accordance with the service plan, including the type, scope, amount, duration, and frequency specified in the service plan.

Of the total number of service plan reviews, the number of reviews that indicate the authorized units match the state's electronic authorization and billing system.

Data Source: SC Supervisor service plan review
Responsible Party for data collection: State Medicaid Agency
Frequency of data collection: Ongoing and continuously, with each
review of the service plan
Sampling Approach: 100% Review
Data Aggregation and Analysis: State Medicaid Agency
Frequency of data aggregation and analysis: quarterly, or as
determined by the DD QI Committee and/or Deputy Director

Of the total number of approved service plans, the number of plans that reflect services were authorized as specified in the plan.

Data Source: SC Supervisor service plan review
Responsible Party for data collection: State Medicaid Agency
Frequency of data collection: Ongoing and continuously, with each
review of the service plan
Sampling Approach: 100% Review
Data Aggregation and Analysis: State Medicaid Agency
Frequency of data aggregation and analysis: quarterly, or as
determined by the DD QI Committee and/or Deputy Director

- e. Sub-assurance: Participants are afforded choice: Between/among waiver services and providers.
 - Number and percent of new waiver participants each year whose records contain an appropriately completed and signed Consent/Request for Services form which offered a choice between institutional and waiver services.

Data Source: SC Supervisor service plan review
Data Source: DD Waiver Eligibility Determination worksheet
Responsible Party for data collection: State Medicaid Agency
Frequency of data collection: Ongoing and continuously, with each review of the service plan applicable to the initiation of this waiver;

continuously and ongoing, with each initial waiver eligibility determination

Sampling Approach: 100% Review
Data Aggregation and Analysis: State Medicaid Agency
Frequency of data aggregation and analysis: quarterly, as
determined by the DD OI Committee and/or Deputy Director

2. The number and percent of new waiver participants or their legal guardian if applicable, that participated in making a choice of waiver providers.

Data Source: SC Supervisor service plan review
Data Source: DD Waiver Eligibility Determination worksheet
Responsible Party for data collection: State Medicaid Agency
Frequency of data collection: Ongoing and continuously, with each
review of the service plan applicable to the initiation of this waiver;
continuously and ongoing, with each initial waiver eligibility
determination

Sampling Approach: 100% Review
Data Aggregation and Analysis: State Medicaid Agency
Frequency of data aggregation and analysis: annually, semiannually, or as determined by the DD QI Committee and/or Deputy
Director

- 3. Of the total number of individual and family pre-service plan meetings conducted annually, the number of meetings that reflect the waiver participant was afforded choice between/among waiver providers.
- ii. If applicable, in the textbox below provide any necessary additional information on the strategies employed by the State to discover/identify problems/issues within the waiver program, including frequency and parties responsible.

In Nebraska, the service plan for participants of this waiver is known as the Individual Program Plan (service plan) or Individual Supports Plan (ISP). The DDD Service Coordinator (SC) is responsible for facilitation and development of the service plan.

The SC Supervisor reviews the initial service plan, and each annual service plan for each waiver participant to ensure it meets the waiver and regulatory standards. The process was developed to also ensure the service plan is completed in accordance with timelines and to aggregate the results to identify issues at various levels of the DDD.

The DDD staff considers assessment information, the individual's personal goals, and the service plan to determine if the services defined flow from the assessments and personal goals. This review includes not only the waiver services, but also the non-waiver services and other natural and community supports identified in the service plan.

If issues (i.e. institutionalized more than 30 days, loss of Medicaid eligibility, failure to utilize waiver services or failure to address health and safety requirements) are identified that will affect the waiver status of the individual, the SC is notified and given a date to respond. Failure to receive corrections may result in the removal of the person from the waiver and notification to the SC supervisor. Correction of the areas of concern may allow the person to be maintained on the waiver or to be put back on the waiver, if they had lost their waiver support. Other issues that do not effect waiver funding are passed along to the SC responsible for the development of the service plan.

To allow for increased state oversight of the service plan review process, the responses are entered into a database. The database allows for individual Disability Services Specialists and SC Supervisors to have access to the information in aggregate form to look at the performance of individual service coordinators. This information is reviewed and acted on, as appropriate, at the local level.

In addition, the SC monitors the implementation of each service plan in its entirety twice annually in addition to the ongoing monitoring of the service plan which may involve specific areas of the service plan within each monitoring session.

In this way, there is an extensive 100% review of the design and the implementation of every service plan for persons receiving waiver services. Monitoring mechanisms include:

- 1. A review of all components of the service plan to ensure delivery of services as specified by the service plan;
- 2. Initiation of any action necessary to ensure the delivery of services and progress toward achieving outcomes. Necessary action includes reconvening the team if a change in the service plan is necessary; and
- 3. A semi-annual review of the service plan by the service coordinator and the service plan team. The team reviews progress, implementation of the service plan, and the need for any revisions to the service plan.

The monitoring process is designed to review the implementation of the total plan after both the annual and semi-annual team meetings. Between these full

monitorings, the SC conducts ongoing monitoring. During each of these monitoring sessions, the SC may scrutinize only some of the items on the monitoring form. This will allow for focused monitoring if issues have been raised or are noted during the time of the monitoring.

To allow for state oversight of the Service Coordination monitoring process, responses on the service plan monitoring forms are currently entered into a web-based database. This allows individual SCs to track issues that are yet unresolved and provide aggregate information for SC Supervisors, the Administrator of Services, and the DDD central office. The information is useful to the Supervisors and Administrator for looking at the performance of individual service coordinators and providers, as well for identifying any area-wide issues. This information is reviewed and acted on, as appropriate, at the local level.

b. Methods for Remediation/Fixing Individual Problems

 Describe the State's method for addressing individual problems as they are discovered. Include information regarding responsible parties and GENERAL methods for problem correction. In addition, provide information on the methods used by the State to document these items.

If issues are discovered that will affect the waiver status of the individual, the SC is notified and given a date to respond. The date of response is determined by the SC supervisor and varies between 5 and 10 working days, based on the nature of the issue. Failure to receive corrections may result in the removal of the person from the waiver, and correction of the areas of concern may allow the person to be maintained on the waiver or to be put back on the waiver if they had lost their waiver status. There is no gap in services to the participant; services are funded by state general funds to ensure continuation of services, health, and safety.

The SC monitoring process is designed to review the implementation of the total plan after both the annual and semi-annual team meetings. Between these full monitoring opportunities, the SC conducts ongoing monitoring. During each of these monitoring sessions, the SC may scrutinize only some of the items on the monitoring form. This will allow for focused monitoring if issues have been raised or are noted during the time of the monitoring.

To allow for state oversight of the SC monitoring process and the service plan review process, the responses are entered into a web-based database. This allows individual SCs to track issues that aren't resolved and provide aggregate information for SC Supervisors, the Administrator of Services, and the DDD central office. The information is useful to the Supervisors and Administrator for looking at the performance of individual service coordinators and providers, as well for identifying

any area wide issues. This information is reviewed and acted on, as appropriate, at the local level.

When issues or problems are discovered during a SC monitoring, the individual's SC documents on the monitoring form a plan to address the issues identified. The plan to address issues may include a team meeting, the facilitation of sharing information between the individual, manager of services, and/or providers, etc. A timeline to address the issues and/or a service plan team meeting date is noted on the monitoring form as well as whether the issues were resolved within the timeline.

When a pattern is detected of inappropriate or inaccurate claims, a referral is made to the DHHS Program Integrity Unit.

Data Source:

DDD Service Coordination Supervisor Program Plan Review

Responsible Party for data collection/generation (check each that applies):

DHHS - State Medicaid Agency

Frequency of data collection/generation (check each that applies):

Continuously and ongoing

Sampling Approach

100%

Data Aggregation and Analysis:

State Medicaid Agency

Frequency of data aggregation and analysis

Quarterly

Annually

Continuously and Ongoing

Semi-annually or as determined by the SC Administrator, the state DDD QI committee, or the DDD Deputy Director